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CONFIRMATION NO. 7288

<b>SERIAL NUMBER</b> 09/770,830	<b>FILING OR 371(c) DATE</b> 01/26/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> SCHWP0126US	
<b>APPLICANTS</b> Richard Braun, Munchen, GERMANY; Robert Schmidt, Munchen, GERMANY;  <b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b> GERMANY 100 30 269.9 01/26/2000  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/30/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> RENNER, OTTO, BOISSELLE & SKLAR, LLP Nineteenth Floor 1621 Euclid Avenue Cleveland ,OH 44115-2191					
<b>TITLE</b> APPARATUS AND METHOD FOR POSITIONING MEDICAL TREATMENT DEVICES OR TREATMENT SUPPORTING DEVICES					
<b>FILING FEE RECEIVED</b> 1107	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		